

**CLAIMS ONLY**

Application Number

16619650

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
4						
5						
6						
7			1			
8						
9						
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12						
13			1			
14						
15			1			
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47						
48						
49						
50						
Total Indep			3			
Total Depend	←	3	←	3	←	1
Total Claims			16			

	Indep	Depend	Indep	Depend	Indep	Depend
51						
52						
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96						
97						
98						
99						
100						
Total Indep						
Total Depend	←		←	←	←	1
Total Claims						